

March 1, 2003
**Montana Medicaid Notice
Pharmacy Providers**

Prior Authorization Changes

The following changes are effective March 01, 2003.

Zolpidem (Ambien) and Zaleplon (Sonata)

Payment for Zolpidem (Ambien®) or Zaleplon (Sonata®) will be authorized upon trial and therapy failure with at least **two** multiple source sleep inducing products. Requests may be authorized upon telephoned, faxed, or written request by the physician or pharmacist to the PA unit. Approvals will be for a **maximum 15 tablets per month**.

Adalimumab (Humira)

Payment for Adalimumab (Humira®) will be authorized when the following criteria are met:

- It can be used alone or in combination with methotrexate or other DMARDs
- Diagnosis of rheumatoid arthritis.
- Patient has had a rheumatology consult.

Migraine Headache Drugs – The Triptans

Naratriptan (Amerge®), Almotriptan (Axert®), Frovatriptan (Frova®), Sumatriptan (Imitrex®), Rizatriptan (Maxalt®), Eletriptan (Relpax®), and Zolmitriptan (Zomig®.) Monthly quantities over nine oral tablets of any triptan, two Imitrex injection kits, six Imitrex nasal sprays, four units of Migranal, or concurrent triptan therapies will require prior authorization.

OxyContin (Oxycodone HCL Controlled-Release)

Effective April 01, 2003, OxyContin (Oxycodone HCL Controlled-Release) Prior Authorization is required for all dosing above twice a day and above 320mg per day. PA criteria is an oncologic pain diagnosis.

Prescription Refills

Effective February 1 2003, prescriptions may be refilled after 75% of the estimated therapy days have elapsed. Refills prior to 75% of the estimated therapy days must be prior authorized by the Drug Prior Authorization Unit. The following circumstances are the only justification for early refills:

- If a client needs a refill sooner than originally scheduled due to a prescriber dosage change.
- Admission to a nursing facility.

Notice about Proposed Administrative Rule Change

On February 14, 2003 the Department filed a proposed amendment to Administrative Rule 37.86.1101. This proposed amendment changes reimbursement to pharmacy providers by increasing the percentage off the Average Wholesale Price (AWP) for generic multiple source drugs without Federal Upper Limits. The proposed change planned to take effect May 1, 2003:

AWP less 15% will change to AWP less 25% for generic multiple source drugs without Federal Upper Limits.

For More information, visit the Department's website <http://www.dphs.state.mt.us> select *Legal Section, Montana Administrative Register, Proposal Notices*. A public hearing about the proposed rule will be held March 19, 2003 at 11:30 a.m. in the auditorium of the Department of Public Health & Human Services Building, 111 N. Sanders, Helena, Montana. Interested parties may submit their data, views, or arguments orally or in writing at the hearing. Written data, views, or arguments may also be submitted to Kathy Munson, Office of Legal Affairs, Department of Public Health & Human Services, P.O. Box 202951, Helena, MT 59620-2951, no later than 5:00 p.m. on March 27, 2003.

Contact Information

If you have any questions, please contact Provider Relations 8:00 a.m. - 5:00 p.m. Monday - Friday (Mountain time):

(800) 624-3958 In state
(406) 442-1837 Out of state